Telephone Inquiry / Response

U.S. Department of Housing and Urban Development Executive Secretariat

Date:	Time:		
Senator (name	e)		
Representativ	e (name)		
Other - Mr./M	rs./Ms.(name)		
Address / Telephor	e:		
HUD Office / Progra	am:		
Name / Telephone	of Person Completing	this Form:	
Subject: (Include date of letter, ACORN Control Number, etc., as appropriate)			
Telephone Inquiry/F	Response:		